Verification of In-State Work for Service Providers

Date:					
From (Vendor Name):					_
Project Name:					_
Production Company Name:					_
To: Georgia Department of Revenue					
Our company's percentage of in-state work versus out-of-state work (including any work by sub-contractors) was allocated as follows. If our company used employees or subcontractors outside of Georgia for any portion of the work (e.g. processing, fabricating, editing, reviewing, etc.), the allocation percentages stated below accurately reflect the services performed in Georgia versus outside Georgia.					
Vendor's Locat	ion(s) (List all Locations)				_
Vendor's Headquarters Located at:					_
Vendor's Georgia Withholding Number					
Did you pay Georgia withholding tax on services (as detailed below) provided by your employees or subcontractors? (Y/N)					
Was any of portion of the work or steps in the process performed by employees or subcontractors outside of Georgia? (Y/N)					
Invoice Date	Invoice Number	<u>Description</u>	<u>Total Amount</u>	% Performed in GA	% Performed Outside GA
We have been	paid in full for all contract	ed work.			
Sincerely,					
,					
Vendor Signature		Printed Name			
Direct Phone N	lumber	Title			
Contact Email	Address				